PTO/SB/17 (01-06)

Under the Pa	nerwork Reduction Act	of 1995, no persi	on are required to	U.S. F	Patent and Trade	proved for use through mark Office; U.S. DEF ation unless it displays	PARTMENT (OF COMMERCE	
9 :7	respond to a collection of information unless it displays a valid OMB control number. Complete if Known								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/026,596-Co			onf. #9588		
FEE TRANSMITTAL						December 20,	December 20, 2001		
For FY 2006				First Named Inventor		Hung-Liang Chiu			
				Examiner Name J		J. L. Williams			
Applicant claims small entity status. See 37 CFR 1.27				Attoria		2137			
TOTAL AMOUNT OF PAYMENT (\$) 1,240.00				Attorney Docket No. 56783(71987					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP									
For the	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x C	X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
		FILING FEE		ARCH FEES		NATION FEES			
Application T	ype Fee	Small E (\$) Fee (Small En		Small Entity Fee (\$)	Fees F	Paid (\$)	
Utility	30			250	200	100			
Design	20	00 100	100	50	130	65			
Plant	20			150	160	80			
Reissue	30	-		250	600	300			
Provisional	20	•	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity									
Fee (\$) Fee (\$)									
Each claim over				50	25				
Each independe				200	100				
Multiple depend				360	180				
Total Claims	Total Claims			aid (\$) Multiple Depend					
-= x = Fee (\$) Fee Paid (\$) HP = highest numer of total claims paid for, if greater than 20.									
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
x =x									
HP = highest numer of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
- 100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 1801 Request for continued examination (RCE) (see 37 790.00									
SUBMITTED BY			 1	Registration No	. 40.000	1	(047) 400		
Signature	The			(Attorney/Agent)	42,693	Telephone	(617) 439	J-4444	
Name (Print/Type)	Steven M. Jens	en				Date	April 10,	2006	

Application No. (if known): 10/026,596

Attorney Docket No.: 56783(71987)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV754868685US in an envelope addressed to:

MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on <u>April 10, 2006</u> Date

Kather	M. Drum						
Signate	ure						
Kathleen Drury							
Typed or printed name of person signing Certificate							
Registration Number, if applicable	Telephone Number						

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

Two Month Request for Extension of Time Under 37 CFR 1.136(a) (2

pages)

Request for Continued Examination Transmittal (1 page)

Amendment dated 2.9.06

Charge \$1,240.00 to deposit account 04-1105